

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number 01 727690		Filing Date	
							Applicant(s)			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments			
	Indep	Depend	Indep	Depend	Indep	Depend				
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Total	2						Total			
Indep	28						Indep			
Depend							Depend			
Total Claims	30						Total Claims			